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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	Attorney Docket No. 10830.0095.NPUS00	
	First Inventor Philippe Armangau	
	Title	Replication of Snapshot Using a File System Copy Differential
	Express Mail Label No. EV 318623698 US	

APPLICATION ELEMENTS		ADDRESS TO: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450	
See MPEP chapter 600 concerning utility patent application contents.			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 98] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 42] 5. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) b. <input type="checkbox"/> (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
		ACCOMPANYING APPLICATION PARTS	
		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Postcard	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ / _____ Prior application information: Examiner: _____ Group Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
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Name (Print/Type)	Richard C. Auchterlonie	Registration No. (Attorney/Agent)	30,607
Signature		Date	June 25, 2003

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17648 U.S. PTO
06/25/03

PTO/SB/17 (01-03)
Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p>		Complete if Known		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number		Unknown
		Filing Date		June 25, 2003
		First Named Inventor		Philippe Armangau
		Examiner Name		Unknown
		Art Unit		Unknown
TOTAL AMOUNT OF PAYMENT		(\$)		2374.00
		Attorney Docket No.		10830.0095.NPUS00

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: <div style="border: 1px solid black; padding: 2px; margin: 2px;"> Deposit Account Number: 05-0889/EMC-03-029 Deposit Account Name: EMC CORPORATION </div> <p style="font-size: x-small;">The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>				FEE CALCULATION (continued)																																																																																																																																																							
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<p>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</p> <table style="width: 100%; font-size: x-small;"> <tr> <td>Total Claims</td> <td>66</td> <td>-20** =</td> <td>46</td> <td>X</td> <td>18.00</td> <td>=</td> <td>828.00</td> </tr> <tr> <td>Independent Claims</td> <td>12</td> <td>-3** =</td> <td>9</td> <td>X</td> <td>84.00</td> <td>=</td> <td>756.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p>				Total Claims	66	-20** =	46	X	18.00	=	828.00	Independent Claims	12	-3** =	9	X	84.00	=	756.00	Multiple Dependent								<p>Other fee (specify) _____</p> <p>*Reduced by Basic Filing Fee Paid</p> <p style="text-align: right;">SUBTOTAL (3) (\$)</p>																																																																																																																															
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SUBMITTED BY				(Complete if applicable)			
Name (Print/Type)		Richard C. Auchterlonie		Registration No.		30,607	
				(Attorney/Agent)		Telephone 713.787.1698	
Signature		<i>Richard C. Auchterlonie</i>		Date		June 25, 2003	

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